

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Takehisa KATSURA

Serial No: 10/810,351

Confirmation No: 8249

Filed: March 26, 2004

For: Body Frame for Motorcycle

Art Unit: 3611

Examiner: Lum Vannucci, Lee Sin Yee

I hereby certify that this correspondence is being transmitted via electronic filing on the date indicated below to:

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450, on  
December 8, 2006

Date of Deposit

Vivian Gutierrez

Name

Signature: *Vivian Gutierrez* 12/8/2006

Signature

Date

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following items:

- ☒ Petition for Extension of Time.  
☒ Amendment.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	18	-	20 **	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	2	-	8 ***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS			\$ 0
Independent Claims: 2, 3, 4, 8, 12, 15, 16 and 17					TOTAL		\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the amount of \$\_\_\_ to cover the additional claims fee to Deposit Account No. 50-1314.
- ☒ Please charge the amount of \$\_\_\_ to cover the three-month extension fee to Deposit Account No. 50-1314.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

Date: December 8, 2006

1999 Avenue of the Stars, Suite 1400  
Los Angeles, California 90067  
Telephone: 310-785-4600  
Facsimile: 310-785-4601

By: *Troy M. Schmelzer*  
Troy M. Schmelzer  
Registration No. 36,667  
Attorney for Applicant(s)